Electronic Patent	App	lication Fe	e Transm	ittal				
Application Number:								
Filing Date:								
Title of Invention:	FLI	FLEXIBLE NAIL ASSEMBLY FOR FRACTURES OF LONG BONES						
			,					
First Named Inventor:	Na	vin N Thakkar						
Filer:	Na	Narendra R. Thappeta						
Attorney Docket Number:	тк	KR-001						
Filed as Small Entity								
U.S. National Stage under 35 USC 371 F	iling	Fees						
Description		Fee Code	Quantity	Amount	Sub-Total in USD(\$)			
Basic Filing:		r						
Basic National Stage Fee		2631	1	150	150			
Natl Stage Search Fige - all other cases		2632	02 FC:2632	250	250 -250.00-0p			
ຕິຕິ Natl Stage Exampres - all other cases		2633	1	100	100			
Pages:			94 FC:2614		-200.00 OP			
Claims: 응 Independent claims in excess of 3								
Independent claims in excess of 3		2614	2	100	200			
Miscellaneous-Filing:								
Petition: 응용			- .					

Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Patent-Appeals-and-Interference:				
Post-Allowance-and-Post-Issuance:			5	
Extension-of-Time:				
Miscellaneous:				

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/ 599,854

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		CLAIMS	AS FILED	- PART I			SMALL E	ENTITY	~ -	OTHER	
L			(Colun	nn 1)	(Columi	n 2)	TYPE		OR _	SMALL	E١
U.	S. NATIONAL	STAGE FEES					RATE	FEE	7	RATE	T
BASIC FEE			SMALL ENT	Γ. = \$ 150	LARGE ENT.	= \$ 300	BASIC FEE	151	OR	BASICFEE	†
EXAMINATION FEE			Satisfies PCT A (4) = \$ 50	, , ,	All other situa \$ 1 <u>0</u> 0 / \$		EXAM. FEE	100		EXAM. FEE	\dagger
SE	ARCH FEE		U.S. is ISA = ALL other co	untries =	All other situa \$ 250 / \$		SEARCH FE			SEARCH FEE	
FEE FOR EXTRA SPEC, PGS.			min	ius 100 =	/ 50 =	=	X \$ 125	=]	X \$ 250 =	1
то	TAL CHARGEA	BLE CLAIMS	18 mi	inus 20 = .			X \$ 25 =	:	OR	X \$ 50 =	†
IND	EPENDENT C	LAIMS	/ п	ninus 3 = .			X \$ 100	=	OR	X \$ 200 =	T
MU	LTIPLE DEPEN	IDENT CLAIM PR	ESENT				+ \$ 180	- 180	OR	+ \$ 360 =	T
* [1	the differenc	e in column ī is	less than zero	o, enter "0"	in column 2	2	TOTAL	630	OR	TOTAL	T
ا ۲		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Columnia) HIGHE: NUMBE PREVIOU PAID FO	ST ER PRE ISLY EX	SENT TRA	RATE	ADDI- TIONAL FEE	OR	SMALL E	7
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18		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU: PAID FO	R PRES	SENT TRA	RATE	ADDI- TIONAL FEE		RATE	TI
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^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20", enter "20".

^{***} If the "Highest Number Previously Pald For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.